

## Matthew R. Maynard Placer County Assessor

Auburn CA 95603 Phone: 530-889-4300 Fax: 530-889-4305 assessor@placer.ca.gov

2980 Richardson Dr

## HOMEOWNERS' EXEMPTION TERMINATION NOTICE

You must notify the Assessor whenever a property you own is no longer eligible for a Homeowners' Exemption. To avoid potential penalties, this must be done by December 10<sup>th</sup> of the year in which the change occurs.

You are entitled to a Homeowners' Exemption on one property in California. A property is eligible for a Homeowners' Exemption if you own <u>and</u> occupy it as your primary residence on January 1<sup>st</sup>. A property is not eligible for an exemption if it is rented, unoccupied, or used as a vacation or secondary home. Failure to notify the Assessor may result in escape assessments and/or penalties and interest for the exempted taxes.

I do not qualify for the Homeowners' Exemption on the property located at:

Assessor Parcel Number: (Please Print)

| Property Address:   |   |      |                                  |  |
|---|---|------|----------------------------------|--|
| Prop  | erty Owner:   |      |                                  |  |
| Last N  | ame First N   | Name | Middle                           |  |
| Pleas   | se check the appropriate box be  I/we do not occupy the property as   |      | e as of (date):                  |  |
|   | ☐ This property is a rental, vacation or secondary home as of (date): |      |                                  |  |
| ☐ This property is vacant or unoccupied as of (date): ☐ I/we no longer own the property as of (date): |   |      |                                  |  |
|   |   |      |                                  |  |
|   | I/we have an exemption on another property in California (address):   |      |                                  |  |
|   | Other reason and date of change:                                      |      |                                  |  |
|   |   |      |                                  |  |
| Curre   | ent Mailing Address:  |      | Γhis is my new primary residence |  |
| Street  | Address   |      |                                  |  |
| City  | State   | Zip  | ()<br>Daytime Phone Number       |  |
| -   |   | -    | •                                |  |
| Signature   |   | Date | Email                            |  |

